



CONGRESSMAN JOEL HEFLEY TOUR REQUEST FORM

Constituent's name: Mr./Mrs./Miss/Ms.: _____

Address: _____

City/State/Zip: _____

Phone: (H): _____ (Cell): _____

Email address: _____

Number of people in your tour group: _____

Date of Arrival in Washington: _____

Contact information while in DC: (phone): _____

Dates **Available** for Tour(s): _____

Tours requested:

Capitol

Supreme Court

Kennedy Center

Library of Congress

National Archives

Bureau of Engraving and
Printing

White House

*(please submit all names, Social security numbers, dates of birth,
and country of origin on the White House tour request form)*

Mail completed form to:

Congressman Joel Hefley

ATTN: TOURS

104 S. Cascade Avenue, #105

Colorado Springs, CO 80903

-OR- fax to 202.225.1942

Please contact Heather McMonigle if you have any questions:

202.225.4422

heather.mcmonigle@mail.house.gov